

**CALIFORNIA PUBLIC EMPLOYEES' RETIREMENT SYSTEM**

Actuarial and Employer Services Division

Public Agency Contract Services

P.O. Box 942709

Sacramento, CA 94229-2709

(916) 326-3420

Agency Name \_\_\_\_\_ Employer # \_\_\_\_\_

Complete and return this form to the above address to request the documents necessary to provide:

**SECTION 20903.5 (ONE TO FOUR YEARS ADDITIONAL SERVICE CREDIT)**

Indicate member groups:

\_\_\_\_\_ Local miscellaneous members

\_\_\_\_\_ Local fire members only

\_\_\_\_\_ Local safety members

\_\_\_\_\_ Local police members only

**Enter dates:**

1. \_\_\_\_\_ THE DATE YOUR AGENCY NEEDS THE RESOLUTION FROM THIS OFFICE TO INCLUDE IN AGENDA FOR YOUR GOVERNING BODY. This date must be at least three weeks from the date this form is received in the office of Public Agency Contract Services.
2. \_\_\_\_\_ COSTS MADE PUBLIC AT LEAST TWO WEEKS PRIOR TO ADOPTION OF RESOLUTION.
3. \_\_\_\_\_ ADOPTION OF RESOLUTION.

**Proposed designated period will begin on \_\_\_\_\_ and end on \_\_\_\_\_.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone

**THIS OFFICE WILL PREPARE ALL NECESSARY DOCUMENTS. IF YOUR AGENCY ATTEMPTS TO EXPEDITE THE PROCESS BY PROCEEDING WITHOUT THE DOCUMENTS PROVIDED BY THIS OFFICE, LEGAL REVIEW MAY BE REQUIRED WHICH COULD DELAY THE PROPOSED DESIGNATED PERIOD.**

PERS-CON-8.4yr (10/97)